

IN THE UNITED STATES DISTRICT COURT
FOR THE Middle DISTRICT OF TENNESSEE
Columbia DIVISION

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FEB 28 2014

U.S. DISTRICT COURT
MID. DIST. TENN.

Anthony Gray Name)

Prison Id. No. 377104)

_____) Name)

Prison Id. No. _____)

Plaintiff(s))

(List the names of all the plaintiffs
filing this lawsuit. Do not use "et
al." Attach additional sheets if
necessary.)

Civil Action No. _____
(To be assigned by the Clerk's
office. Do not write in this space.)

Jury Trial ☐ Yes ☒ No

v.)

Enoch George Name)

Sheriffs Dept. Name)

Defendant(s))

(List the names of all defendants
against whom you are filing this
lawsuit. Do not use "et al." Attach
additional sheets if necessary.)

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS
FILED PURSUANT TO 42 U.S.C. § 1983

I. PREVIOUS LAWSUITS (The following information must be provided by each plaintiff.)

A. Have you or any of the other plaintiffs in this lawsuit filed any other lawsuits in the United States District Court for the Middle District of Tennessee, or in any other federal or state court?

☐ Yes ☒ No

B. If you checked the box marked "Yes" above, provide the following information:

1. Parties to the previous lawsuit:

Plaintiffs _____

Defendants _____

2. In what court did you file the previous lawsuit? N/A
(If you filed the lawsuit in federal court, provide the name of the District. If you filed the lawsuit in state court, provide the name of the state and the county.)
3. What was the case number of the previous lawsuit? N/A
4. What was the Judge's name to whom the case was assigned? N/A
5. When did you file the previous lawsuit? N/A (Provide the year, if you do not know the exact date.)
6. What was the result of the previous lawsuit? For example, was the case dismissed, appealed, or still pending? N/A
7. When was the previous lawsuit decided by the court? N/A (Provide the year, if you do not know the exact date.)
8. Did the circumstances of the prior lawsuit involve the same facts or circumstances that you are alleging in this lawsuit.

☐ Yes ☒ No

(If you have filed more than one prior lawsuit, list the additional lawsuit(s) on a separate sheet of paper, and provide the same information for the additional lawsuit(s).)

II. THE PLAINTIFF'S CURRENT PLACE OF CONFINEMENT (The following information must be provided by each plaintiff.)

- A. What is the name and address of the prison or jail in which you are currently incarcerated? Maverick County Jail
1300 Lawson White Dr. Columbia TN 38401
- B. Are the facts of your lawsuit related to your present confinement?
- ☒ Yes ☐ No
- C. If you checked the box marked "No" in question II.B above, provide the name and address of the prison or jail to which the facts of this lawsuit pertain.
- _____
- D. Do the facts of your lawsuit relate to your confinement in a Tennessee State Prison?
- ☐ Yes ☒ No

If you checked the box marked "No," proceed to question II.H.

E. If you checked the box marked "Yes" in question II.D above, have you presented these facts to the prison authorities through the state grievance procedure?

☐ Yes ☐ No

F. If you checked the box marked "Yes" in question II.E above:

1. What steps did you take? _____

2. What was the response of prison authorities? _____

G. If you checked the box marked "No" in question II.E above, explain why not. _____

H. Do the facts of your lawsuit pertain to your confinement in a detention facility operated by city or county law enforcement agencies (for example, city or county jail, workhouse, etc.)?

☒ Yes ☐ No

I. If you checked the box marked "Yes" in question II.H above, have you presented these facts to the authorities who operate the detention facility?

☒ Yes ☐ No

J. If you checked the box marked "Yes" in question II.I above:

1. What steps did you take? wrote grievances

2. What was the response of the authorities who run the detention facility? Problem would be taken care of

L. If you checked the box marked "No" in question II.I above, explain why not. _____

Attach copies of all grievance related materials including, at a minimum, a copy of the grievance you filed on each issue raised in this complaint, the prison's or jail's response to that grievance, and the result of any appeal you took from an initial denial of your grievance.

III. PARTIES TO THIS LAWSUIT

A. Plaintiff(s) bringing this lawsuit:

1. Name of the first plaintiff: ANTHONY GRAY

Prison Id. No. of the first plaintiff: 377104

Address of the first plaintiff: 1300 Lawson White Dr
Columbia TN 38401

(Include the name of the institution and mailing address, including zip code.
If you change your address you must notify the Court immediately.)

2. Name of second the plaintiff: _____

Prison Id. No. of the second plaintiff: _____

Address of the second plaintiff: _____

(Include the name of the institution and mailing address, including zip code.
If you change your address you must notify the Court immediately.)

If there are more than two plaintiffs, list their names, prison identification numbers, and addresses on a separate sheet of paper.

B. Defendant(s) against whom this lawsuit is being brought:

1. Name of the first defendant: Enoch George

Place of employment of the first defendant: Mauvey County Sheriffs Dept.

The first defendant's address: 1300 Lawson White Dr.
Columbia TN 38401

Named in official capacity? ☒ Yes ☐ No

Named in individual capacity" ☒ Yes ☐ No

2. Name of the second defendant: Mauvey Co. Sheriffs Dept

Place of employment of the second defendant: Mauvey Co. Sheriffs Dept

The second defendant's address: 1300 Lawson White Dr
Columbia, TN 38401

Named in official capacity? ☒ Yes ☐ No

Named in individual capacity" ☒ Yes ☐ No

If there are more than two defendants against whom you are bringing this lawsuit, you must list on a separate sheet of paper the name of each additional defendant, their place of employment, their address, and the capacity in which you are suing them. If you do not provide the names of such additional defendants, they will not be included in your lawsuit. If you do not provide their proper name, place of employment, and address, the Clerk will be unable to serve them should process issue.

IV. STATEMENT OF FACTS

State the relevant facts of your case as briefly as possible. Include the dates when the incidents or events occurred, where they occurred, and how each defendant was involved. Be sure to include the names of other persons involved and the dates and places of their involvement.

If you set forth more than one claim, number each claim separately and set forth each claim in a separate paragraph. Attach additional sheets, if necessary. Use 8 1/2 in. x 11 in. paper. Write on one side only, and leave a 1 in. margin on all four sides.

I, Anthony Gray turned myself in on Dec. 30th 2013 to Marry Co. Jail. The day I came in I noticed black mold spreading all around the ceiling where I was housed. I waited over a month for the issue to be fixed. I filed a grievance on 2-3-14. The Lt. wrote back saying it has been fixed which it wasn't. So I appealed again to higher authority which said it was fixed also but a couple of days later they came in and spread kilt over it which did not solve the problem. Since I've been here only 2 out of 3 showers have worked, toilets are always messing up. Showers are dirty all the time. Water always builds up in front of shower which causes mold to form around the corner of pod. I'm constantly losing weight. Air stays on all year round.

V. RELIEF REQUESTED: Specify what relief you are requesting against each defendant.

- A. \$250,000
- B. Pay for appointment to have my lungs and body checked for mold
- C. Have someone come in and check jail out for any problems
- D. _____
- E. _____
- F. I request a jury trial. ☐ Yes ☒ No

VI. CERTIFICATION

I (we) certify under the penalty of perjury that the foregoing complaint is true to the best of my (our) information, knowledge and belief.

Signature: Anthony Almy Date: 2-22-14

Prison Id. No. 377104

Address: 1300 Lawson White Dr. Columbia TN 38401

(Include the city, state and zip code.)

Signature: _____ Date: _____

Prison Id. No. _____

Address: _____

(Include the city, state and zip code.)

ALL PLAINTIFFS MUST SIGN AND DATE THE COMPLAINT, and provide the information listed above. If there are more than two plaintiffs, attach a separate sheet of paper with their signatures, dates, prison identification numbers, and addresses.

ALL PLAINTIFFS MUST COMPLETE, SIGN, AND DATE SEPARATE APPLICATIONS TO PROCEED IN FORMA PAUPERIS, if not paying the civil filing fee.

SUBMIT THE COMPLAINT, THE REQUIRED FILING FEE, OR APPLICATION TO PROCEED IN FORMA PAUPERIS, TOGETHER. Complaints received without the required filing fee or application to proceed *in forma pauperis* will be returned. Filing fees, or applications to proceed *in forma pauperis*, received without a complaint will be returned.

MAURY COUNTY SHERIFF'S DEPARTMENT
INMATE GRIEVANCE FORM
 (ONLY ONE COMPLAINT PER FORM)

Rev. 10/2013

NAME	DATE OF INCIDENT	HOUSING UNIT
Anthony Gray	2-3-14	618
Nature of Grievance: Indicate the events and reason that led you to file this grievance. Specify dates, places, personnel involved, and how you were affected. If you need more space, you may attach additional pages. <small>Grievance must be submitted within 7 days of the grieved incident. Grievances are limited to 3 per calendar week (Sun-Sat).</small>		
Ever since I came to jail (12-30-13) there has been black mold spreading on part of the ceiling and yet has been fixed. I know it's airborne and very dangerous And the Faucet that we drink water out of has mold.		
Requested Resolution: Describe what action you want taken to remedy the grievance.		
To be fixed		
Attempts at Resolution: Have you made any attempts at informal resolution? <small>(Example: Notes, requests or conversations with any staff member. Include names and approximate dates.)</small>		
INMATE SIGNATURE Anthony Gray		Date 2-3-14

(Do not write below dotted line)

Your grievance has been received and has been assigned No.

2014-0117

☐ Your grievance will be processed and returned within 5 business days.

☐ Your grievance is being returned and will not be processed for the following reason(s):

- ☐ You do not provide sufficient details (who, what, when, etc.)
- ☐ The issue has already been grieved by you (Grievance No. _____)
- ☐ Your grievance was not signed
- ☐ You do not provide any "Requested Resolution"
- ☐ You request resolution on more than one issue
- ☐ Your grievance contains inappropriate or disrespectful language
- ☐ Your grievance has been ruled "non-grievable" since it deals with a matter that does not fall under the jurisdiction of the Maury County Sheriff's Dept. or deals with a matter that already has an appeal process
- ☐ Other: _____

LEVEL 1 GRIEVANCE RESPONSE AND REASON (Shift Sergeant or above)

The leak in the skylight has been repaired but maintenance wants to make sure leak is fixed before drywall is replaced, should be within 2 weeks. Inspection officer saw calcium deposits but no mold on sinks. If you see mold then pod is obviously not being cleaned adequately + trustees may have to take that job back.

LEVEL 1 GRIEVANCE OFFICER (Print name and sign)

DATE

Debra Wagonschutz Debra Wagonschutz

2/4/14

Appeal this response? If Yes, state basis for appeal

YES

YES

NO

The leak in the skylight has not been fixed. It's still leaking. we have a bucket in the middle of pod to catch the water

You may attach extra pages if necessary. Appeal must be made within 5 days of receipt of response

INMATE SIGNATURE

Date

Anthony Gray

2-4-14

LEVEL 2 GRIEVANCE RESPONSE AND REASON (Lieutenant or above)

I concur with Level 1 response

YES

NO

I Concur with Level 1: P.S. Also Did speak with Maintenance Tim CARTER AND was ADVISED by him that HE HAS TAKEN CARE OF THE PROBLEM!

LEVEL 2 GRIEVANCE OFFICER (Print name and sign)

DATE

Appeal this response? If Yes, state basis for appeal

YES

YES

NO

The leak has not been fixed. As long as it's a leak the moisture will cause the mold to come back plus the mold was not properly cleaned. Only thing that was done was the mold was scraped off and spread kilt over it. The leak will cause mold to come back. Not properly cleaned

You may attach extra pages if necessary. Appeal must be made within 5 days of receipt of response

INMATE SIGNATURE

Date

Anthony Gray

2-9-14

LEVEL 3 (FINAL) GRIEVANCE RESPONSE AND REASON (Captain or above)

I concur with Level 2 response

YES

NO

MAINTENANCE FIXED.

LEVEL 3 (FINAL) GRIEVANCE OFFICER (Print name and sign)

DATE

Nathan Johns

- NATHAN JOHNS

2-12-14